

# Attention

## Tribal Member and 1<sup>st</sup> Generation Indian Youth in grades 1<sup>st</sup> -12<sup>th</sup>.

Get help with school work at:

# Homework Club!

### ▪ Who is eligible?

- Any tribal student who wishes to receive help with homework, research, projects, etc.

### ▪ What services are available?

- Tutoring, homework help, computer usage, math and reading practice and assistance with school projects, etc.

### ▪ Where is the Club held?

- The Homework Club is held in the children's Library area of the PCI Education Department.

### ▪ When is it held?

- The Homework Club is held every **Monday-Thursday** throughout the school year from **5:00-7:30 p.m.** beginning in

**August!**

*Any eligible student may attend at any time!*

For more information, please contact **Christyn Sells-Children's Services Coordinator** @ (251)368-9136 ext. 2244 or [csells@pci-nsn.gov](mailto:csells@pci-nsn.gov)



# PCI Homework Club

## Enrollment Form 2015-2016

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Apt#: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Tribal Roll Member - Roll Number: \_\_\_\_\_

1<sup>st</sup> Generation Descent Parent's Roll Number: \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_

### Contact/Pick-Up List

(Please include phone numbers)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

**Why do you want to join the PCI Homework Club? (Circle all that apply)**

- To receive tutoring
- To get help with homework
- Computer research
- Graduation Exam Practice
- To work on a project

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# PCI Homework Club

## **Rules:**

1. No loud voices or “Horseplay”!
2. No eating or drinking near the computers!
3. Bring necessary materials for study, homework, projects etc...
4. Never leave the Education Department without being signed out and telling a staff member!

**Please sign below to indicate that you understand the Homework Club Rules.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



PCI  
After School Tutoring  
Program

**Authorization for release of student information**

I, \_\_\_\_\_ give my permission for \_\_\_\_\_  
(Parent/Guardian) (School name)

to release the following information as it relates my child, \_\_\_\_\_:  
(Child's name)

Report cards, test scores, standardized test scores, DIBELS scores, Accelerated Reader Points/scores, disciplinary/behavioral information, IEP status and information, and special education testing information. This information will be used to monitor and evaluate my child's progress, and ensure appropriateness for the PCI Remediation Program. I understand that information released may be given verbally or in writing, and that this release is good for the academic year 2015-2016 and that I may revoke this release at any time by contacting the school and informing them of this revocation. A photocopy of this authorization may be used in the same manner and with the same effect as the original document.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Children's Services Coordinator Signature

\_\_\_\_\_  
Date

**Poarch Band of Creek Indians  
Johnson O'Malley Program  
Indian Certification Form**

**I. School Information**

Name of School: \_\_\_\_\_  
School Address: \_\_\_\_\_

**II. Student Information**

Last name \_\_\_\_\_ First name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Tribal Affiliation \_\_\_\_\_  
Enrollment number \_\_\_\_\_ Blood Quantum \_\_\_\_\_ Phone number \_\_\_\_\_  
Student Address \_\_\_\_\_

**III. Parental Information**

**Mother** ( ) Indian ( ) Non-Indian

**Father** ( ) Indian ( ) Non-Indian

A.) Father's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Tribal Affiliation \_\_\_\_\_  
Enrollment number \_\_\_\_\_ Blood Quantum \_\_\_\_\_

B.) Mother's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Tribal Affiliation \_\_\_\_\_  
Enrollment number \_\_\_\_\_ Blood Quantum \_\_\_\_\_

C.) Parental Status: **Please (x) all boxes that apply to the custody and residence of the child.**

1. ( ) Natural Parent    3. ( ) Other Family Members    5. ( ) Legal Guardian  
2. ( ) Adoptive        4. ( ) Foster        6. ( ) Other \_\_\_\_\_

**Release of Information: I authorize the Poarch Band of Creek Indians and their designated person(s) to obtain my child's tribal membership and/or blood quantum to determine eligibility for services.**

PARENT

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**IV. Verification Information**

- A.) The above named student meets the eligibility criteria as determined by the Bureau of Indian Affairs and I hereby certify that this student is a member of or is at least one fourth (1/4) degree Indian blood descendent of a member of an Indian tribe which is eligible for the special programs and services provided through the Bureau of Indian Affairs to Indians because of their status as Indians.

\_\_\_\_\_  
Signature of Authorized Bureau or Tribe Official                      Date

- B.) The above named student does **NOT** meet the eligibility criteria for the following reasons(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



2015-2016

# Transportation Waiver

for the  
**PCI Education Department**

in cooperation with the

**PCI Boys and Girls Club**

I, \_\_\_\_\_ give permission for the PCI  
(Parent/Guardian name)

Education Dept. /Boys and Girls Club staff to transport my  
child(ren),

---

**Child(ren)'s Name(s)**

**between the PCI Boys & Girls Club and the Poarch Creek Education Department, in building 300, any day, Monday-Friday for Tutoring, homework club and/or 4-H, etc. I understand that my child must be picked up from the designated pick up area at the agreed upon pick up time.**

---

**Parent/Guardian Signature**

---

**Date**